## BEST AVAILABLE COPY

Application or Docket Number

| PATENT APPLICATION . | <b>E DETERMINATION RECORD</b> |  |
|----------------------|-------------------------------|--|
| Effective            | Fifective October 1, 2001     |  |

| Effective October 1, 2001 10-019, 40 6   |  |   |                         |                               |  |                  |                 |          |                               | 26    |                      |                        |
|--|--|---|-------------------------|-------------------------------|--|------------------|-----------------|----------|-------------------------------|-------|----------------------|------------------------|
| CLAIMS AS FILED - PART (Column 1)  |  |   | 214                     |                               |  | MALL ENTITY YPE  |                 |          | OTHER THAN<br>OR SMALL ENTITY |       |                      |                        |
| TOTAL CLAIMS   |  |   |                         |                               | The state of the s |                  | RAT             | F        | FEE                           | ]     | RATE                 |                        |
| FOR  |  |   | NUMBER FILED            |                               | NUMBER EXTRA   |                  | BASIC           |          | 370.00                        | 1_    | BASIC FEE            | FEE<br>370             |
| TOTAL CHARGEABLE CLAIMS  |  |   | 111                     |                               | HOMBENCATIA  |                  |                 | $\dashv$ | 370.00                        | OR    | BASIC FEE            | 740.00                 |
|  |  |   | /                       | us 20=                        |  |                  | X\$ 9           | =        |                               | OR    | X\$18=               |                        |
| INDEPENDENT CLAIMS   |  |   | 2 minus 3 =             |                               |  |                  | X42:            | -        |                               | OR    | X84=                 |                        |
| MULTIPLE DEPENDENT CLAIM PRESENT   |  |   |                         |                               |  | +140             |                 |          |                               | +280= | -                    |                        |
| * If the difference in column 1 is less than zero, enter "0  |  |   |                         |                               | r "0" in c   | column 2         |                 | _        |                               | OR    |                      | G ~                    |
| CLAIMS AS AMENDED - PART II  |  |   |                         |                               |  |                  | TOTA            | L L      |                               | OR    | TOTAL                | 890                    |
|  |  |   | (Colur                  |                               | SMALL ENTITY   |                  |                 | OR       | OTHER THAN R SMALL ENTITY     |       |                      |                        |
| AMENDMENT A  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |                         | HIGH<br>NUM<br>PREVIO<br>PAID | EST<br>BER<br>DUSLY  | PRESENT<br>EXTRA | RATE            | T        | ADDI-<br>FEE                  |       | RATE                 | ADDI-<br>TIONAL<br>FEE |
| ND   | Total  | *   | Minus                   | **                            |  | =                | X\$ 9:          | <u> </u> |                               | OR    | X\$18=               |                        |
| ME   | Independent  | *   | Minus                   | ***                           |  | =                | X42=            |          |                               |       | X84=                 |                        |
|  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM   |   |                         |                               |  |                  |                 | -        |                               | OR    | 7,042                |                        |
|  |  |   |                         |                               |  |                  | +140:           | =        |                               | OR    | +280≒                |                        |
|  |  |   |                         |                               |  |                  | TOT<br>ADDIT, F |          |                               | OR    | TOTAL.<br>ADDIT. FEE |                        |
| _  | ALLEGE SPECIAL SECTION OF SECTION | (Column 1)                                | San San Charles San San | (Colur                        |  | (Column 3)       |                 |          |                               | _     |                      |                        |
| AMENDMENT B  |  | REMAINING<br>AFTER<br>AMENDMENT           |                         | NUM<br>PREVIO<br>PAID         | BER<br>DUSLY   | PRESENT<br>EXTRA | RATE            |          | ADDI-<br>TONAL<br>FEE         |       | RATE                 | ADDI-<br>TIONAL<br>FEE |
| Q  | Total  | *   | Minus                   | **                            |  | =                | X\$ 9=          | =        |                               | OR    | X\$18=               | I                      |
| AME  | Independent  | *   | Minus                   | ***                           | - OL AUA   | =                | X42=            |          |                               | OR    | X84=                 |                        |
|  | FIRST PRESE  | NTATION OF MU                             | JUIPLE DEF              | ENDENT                        | CLAIM  |                  | +140=           |          |                               | OR    | +280=                |                        |
|  |  |   |                         |                               |  |                  | TOT             |          |                               | l     | TOTAL                |                        |
|  |  | /O / 4V                                   |                         |                               |  |                  | ADDIT. F        | EE L     | لــــــــا                    | OR    | ADDIT. FEE           |                        |
|  | · · · · · · · · · · · · · · · · · · ·  | (Column 1)<br>CLAIMS                      | San to a section Res    | (Colur<br>HIGH                |  | (Column 3)       |                 |          |                               |       |                      |                        |
| AMENDMENT C  |  | REMAINING<br>AFTER<br>AMENDMENT           |                         | NUM<br>PREVIO<br>PAID         | DUSLY  | PRESENT<br>EXTRA | RATE            |          | ADDI-<br>IONAL<br>FEE         |       | RATE                 | ADDI-<br>TIONAL<br>FEE |
|  | Total  | *   | Minus                   | **                            |  | =                | X\$ 9=          | .        |                               | OR    | X\$18=               | ·                      |
|  | Independent  | *   | Minus                   | ***                           |  | =                | X42=            | +        |                               |       | X84=                 |                        |
| Ľ  | FIRST PRESENTATION OF MULTIPLE DEPENDENT OF  |   |                         |                               | CLAIM  |                  |                 | +        |                               | OR    | 7.07=                |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  |  |   |                         |                               |  |                  |                 |          |                               |       |                      |                        |
| ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  TOTAL ADDIT. FEE  ADDIT. FEE |  |   |                         |                               |  |                  |                 |          |                               |       |                      |                        |
|  |  | nber Previously Pa                        |                         |                               |  |                  | found in the    | appr     | opriate boy                   |       |                      |                        |